

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:** JB DOGM S/019/035

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

Pictures

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

SAL VENTICINQUE  
bureau of land management  
MOAB FIELD OFFICE  
82 E DOGWOOD STE M  
MOAB UT 84532

4a. Article Number

P 074 976 781

4b. Service Type

- |   |                                    |
|---|------------------------------------|
| <input type="checkbox"/> Registered                     | <input type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail                   | <input type="checkbox"/> Insured   |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD       |

7. Date of Delivery

11/8/99

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

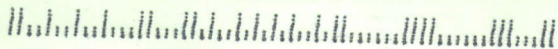


First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

● Print your name, address, and ZIP Code in this box ●

DIVISION  
OF  
OIL GAS & MINING  
1594 W NORTH TEMPLE STE 1210  
BOX 145801  
SALT LAKE CITY UT 84114-5801

114-3801



P 074 976 781

# RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED

NOT FOR INTERNATIONAL MAIL

(See Reverse)

JB

DOGM

S/019/035

Pictures

Sent to SAL VENTICINQUE  
BUREAU OF LAND MANAGEMENT

Street MOAB FIELD OFFICE  
82 E DOGWOOD STE M

P.O., State and ZIP Code  
MOAB UT 84532

Postage

\$

Certified Fee

Special Delivery Fee

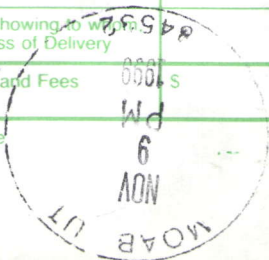
Restricted Delivery Fee

Return Receipt showing  
to whom and Date Delivered

Return Receipt showing to whom  
Date, and Address of Delivery

TOTAL Postage and Fees

Postmark or Date



STICK POSTAGE STAMPS TO ARTICLE TO COVER FIRST CLASS POSTAGE,  
CERTIFIED MAIL FEE, AND CHARGES FOR ANY SELECTED OPTIONAL SERVICES. (see front)

1. If you want this receipt postmarked, stick the gummed stub to the right of the return address leaving the receipt attached and present the article at a post office service window or hand it to your rural carrier. (no extra charge)
2. If you do not want this receipt postmarked, stick the gummed stub to the right of the return address of the article, detach and retain the receipt, and mail the article.  
1085-1408 1085-1408 1085-1408
3. If you want a return receipt, write the certified mail number and your name and address on a return receipt card, Form 3811, and attach it to the front of the article by means of the gummed ends if space permits. Otherwise, affix the back of article. Endorse front of article **RETURN RECEIPT REQUESTED** adjacent to the number.  
1085-1408 1085-1408 1085-1408
4. If you want delivery restricted to the addressee or to an authorized agent of the addressee, endorse **RESTRICTED DELIVERY** on the front of the article.  
1085-1408 1085-1408 1085-1408
5. Enter fees for the services requested in the appropriate spaces on the front of this receipt. If return receipt is requested, check the applicable blocks in item 1 of Form 3811.
6. Save this receipt and present it if you make inquiry.